

REMARKS

Claims 1-14 and 21-40 remain pending and claims 15-20 and 41 have been cancelled. Reconsideration of the application in view of the following remarks and above-identified amendments is respectfully requested.

Claim Rejections Under 35 U.S.C. §101

Claims 15-20 stand rejected on the basis that the claims are directed to non-statutory subject matter. Although Applicants disagree, claims 15-20 have been cancelled to advance prosecution; thus rendering the rejection moot.

Claim Rejections Under 35 U.S.C. §102

Claims 1-41 stand rejected on the basis that the claims are anticipated by US 5,724,575 (“Hoover”). Applicants respectfully traverse the rejection.

Claims 15 through 20 and claim 41 have been cancelled; thus rendering the rejection moot with respect to claims 15-20 and 41.

With respect to claims 1 and 27, the Office Action contends that figure 3 and column 16, lines 20-31 teach retrieving information locator data “that identifies a location of at least one health care record stored at a corresponding one of the plurality of disparate locations.” With respect to figure 3 of Hoover, the Office Action does not identify with any specificity what portion of figure 3 depicts information locator data, and Applicants are unable to identify anything corresponding the claimed information locator data in figure 3. In addition, Applicants submit that Col. 16, lines 20-31 of Hoover, which is provided below for convenience, does not disclose anything corresponding to the claimed “information locator data.”

FIG. 3 illustrates a transaction such as might be found in the health care services industry, as where a patient with an illness visits a physician's office. The real transaction, therefore, involves two subjects, a patient (subject 1) and a physician's office (subject two), engaged in an exchange of some type. Typically, in exchange for money, health services are rendered by the physician's office. Although this is an over-simplification, for the present it is sufficient to note that a transaction typically involves one or more subjects, involving one or more items of exchange (IOE). The information that is generated in such a real transaction is transformed into data items, particularly if third party guarantors such as insurance companies that pay benefits are involved. Typically, the data items relate to the items of exchange.

(Hoover, Col. 16, lines 20-31).

As a consequence, Applicants submit the rejection of claims 1 and 27 is improper and should be removed.

With respect to Claims 7, 11, 23, and 33, the Office action contends that Hoover teaches the claimed "locator data" at Col. 6, lines 5-8, which is provided below for convenience:

(e) in response to retrieval of an object identifier for the subject in question in the preceding step, retrieving the location of a remote user computer associated with the retrieved object identifier; and
(Hoover, Col. 6, lines 5-8).

This portion of Hoover, however, does not teach locator data "that identifies a remote location, among the plurality of disparate organizations, of the particular health care information pertaining to the person" as required by claim 7. Nor does Col. 6, lines 5-8 teach locator data "that identifies at least one remote data system from among a plurality of disparate data systems, wherein the at least one remote data system stores one or more health care records for the particular person" as required by claim 11. This portion of Hoover also does not teach locator data that indicates "the location of one or more specific health care records from within the plurality of disparate organizations" as

required by claim 23. Finally, Col. 6, lines 5-8 does not teach locator data that “identifies a remote location of the particular health care information pertaining to the person from among the plurality of disparate providers” as required by claim 33. As a consequence, the rejection of claims 7, 11, 23 and 33 is improper and should be removed.

With respect to claims 21 and 22, the Office action contends that figure 26, column 17, lines 38-45 teach the claimed means for receiving information locator data. But these portions of Hoover does not teach any construct that receives “information locator data from each of the plurality of disparate organizations including data that identifies a location of at least one health care record stored at a corresponding one of the plurality of disparate organizations” as required by claim 21. Nor does figure 26 or column 17, lines 38-45 teach a construct that retrieves “locator data including data that identifies, from among the plurality of disparate organizations, a remote location of the particular health care information pertaining to the person” as required by claim 22; thus the rejection of claims 21 and 22 should be removed.

The Office Action also contends that the information locator data recited in claim 37 is taught by Hoover at figure 26 and column 17, lines 38-45. But this portion of Hoover does not teach information locator data “that identifies a remote location of the records distributed among the disparate organizations” as recited in claim 37; thus the rejection of claim 37 should also be removed.

Finally, Applicants submit that dependent claims 2-6, 8-10, 12-14, 24-26, 28-32, 34-36 and 38-40 are allowable, at least, by virtue of being dependent from their respective independent claims.

CONCLUSION

In view of the foregoing, Applicants respectfully submit that no further impediments exist to the allowance of this application and, therefore, solicit an indication of allowability. However, the Examiner is requested to call the undersigned if any question or comments arise.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-1283.

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Respectfully submitted,

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